Image# 11930210222 017/2074 11:02

## **FEC FORM 5**

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

| (a) Name of Individual, Organization or Corporation  |  |                           |  |
|--|--|---------------------------|--|
| AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO  |  |                           |  |
|  | Address (number and street)  |                           |  |
| (c)  | City, State and ZIP Code   |                           |  |
| WASHINGTON DC 20036  |  | FEC Identification Number |  |
| 2. <b>C</b> c  | prporate filers only   | <b>C</b> C90011172        |  |
|  | Is the filer a qualified nonprofit corporation?  |                           |  |
| In   | dividual filers only  Name of Employer   | Occupation                |  |
|  |  | •                         |  |
| $\vdash \vdash$  | Type of Deposit A type of Depo |                           |  |
|  | 4. TYPE OF REPORT (check appropriate boxes):   |                           |  |
|  | (a) April 15 Quarterly Report 24-Hour Notice 48-H  | our Notice                |  |
|  | ☐ July 15 Quarterly Report   |                           |  |
|  |  |                           |  |
|  | ☐ October Quarterly Report   |                           |  |
|  | ✓ January 31 Year-End Report   |                           |  |
|  |  |                           |  |
|  | (b) Is this Report an amendment? Yes \( \subseteq \text{No } \( \text{X} \)  |                           |  |
|  | 5. COVERING PERIOD: FROM M, M, O O O O O O O O O O O O O O O O   |                           |  |
|  | THROUGH  |                           |  |
|  | 1 2  |                           |  |
|  | 6. TOTAL CONTRIBUTIONS   | .00                       |  |
|  | 6. TOTAL CONTRIBUTIONS   |                           |  |
|  | 7. TOTAL INDEPENDENT EXPENDITURES  | 1850523.80                |  |
| Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the   |  |                           |  |
| request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations. |  |                           |  |
| TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE DATE  |  |                           |  |
|  |  |                           |  |
| STEI   | PHEN GRAHAM  | 01/27/2011                |  |
| NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C 437g.  |  |                           |  |
|  |  |                           |  |

 $For \ further \ information, \ contact:$ 

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100